Individual and Family Support Program Question and Answers

1. Do I have to use the whole \$3000 that is available?

No, please only apply for what you need. This program is needs based. Each person will need different things, and all applications will be reviewed with an eye to evidence of an individual's/family's need for the requested item, support or service. EXAMPLE: If a support or service that you need will only cost \$600, then please only apply for that amount. NOTE: "Shopping lists" of items to reach \$3000, will be reviewed carefully and documentation to justify each item will be required.

2. How detailed does the request need to be? Will they need a letter of medical necessity?

A letter of medical necessity is not required for services or supports that are not medical in nature. Those that are medical in nature will require a letter of medical necessity. The request needs to be detailed enough to allow the person reviewing the document, who doesn't know the individual personally, to understand the need for the support or service.

3. Do applicants need to send a quote or just the amount that the item is going to cost based on what they have found?

A direct quote is preferred. An estimation showing how the amount being requested was derived is required. This allows ISF program staff to justify the amount being requested and know exactly how much funding to send to the individual. Staff will verify estimations to ensure appropriate funding amounts are approved. Funding requests that are questionable will be pended for additional information or denied.

4. Do the providers receiving funding need to be Medicaid providers?

No, they do not.

5. How does the provider get paid?

Funding will go directly to the individual who signs the application agreement. It is that person's responsibility to ensure that payment is made to the provider of services and supports and receipt of payment is collected and forwarded to the IFS Program.

6. If the amount required for a needed service/support is over \$3000, can an individual/family member apply for partial funding of the service/support by requesting the full \$3000?

In some instances it may be possible to partially fund a support. The applicant must be able to provide documentation to show the source of additional funding in order to complete the

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project. EXAMPLE: The IFSP will not fund a fence to be partially completed. There must be evidence that the fence would be fully completed. What that evidence would be is the responsibility of the applicant.

7. When will applicants receive an answer as to whether they are approved or not?

Funding requests will be processed on a first come first served basis. We anticipate that all funding request will be processed in 10 business days. There may be times when a large number of requests have been submitted, causing delays to occur. Applications will be processed as soon a possible.

8. If the amounts are exhausted for that fiscal year, do the individuals need to apply the next fiscal year or can they apply for that fiscal year and be placed on a waiting list?

When funding is exhausted, a notice will be placed on the DBHDS website under Developmental Services. Denial notices, along with the incoming application, will be mailed back to applicants. New applications and documentation will be required to be sent in to the program at the beginning of the new fiscal year. This program will not have a waitlist.

9. If a service such as Day Support is approved during the 2012-2013 year, will payments be able to extend into the 2013 - 2014 year?

No, a new application and documentation will have to be submitted yearly for approval.

10. My son needs speech therapy that is not offered during the summer, we were looking to hire a private-pay therapist to work with our son over the summer. How will you verify the quote given on application?

There are standard rates for most professional services. Any professional should be able to provide a quote for the amount of time services are requested and the rate of payment they are expecting. Contact information for the professional, professional licensing number if applicable, and a signature of the person providing the quote should also be on the paperwork submitted with the IFSP application.

11. Is there a family limit? If a family has several children on ID/DD Waiver wait list, are they eligible for up to \$3000 per child?

There is no family limit. Each person within a household who is on a waitlist is eligible for up to \$3000 per fiscal year. EXAMPLE: A family has twins with autism, both of whom are on the DD Waitlist. Each child is eligible for the \$3000. So, conceivably, \$6000 in funding for supports and

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services could be mailed to this household. Please remember that this money is for supports and services and must be documented on how it is to be used to benefit each individual.

12. Is there any way that ID/DD Waiver recipients could eventually access these funds to cover services they cannot get through the waiver (for instance, ongoing therapies, since many therapists do not accept Medicaid, and things like therapeutic horseback riding, which aren't covered by Medicaid)?

Not at this time. This program is to assist the 7700 families currently not receiving any services.

13. Are people in Assisted Living Facilities eligible?

Those residing in Assisted Living Facilities (ALFs) are eligible.